



CDSS

WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

# C C L D COMMUNITY CARE LICENSING DIVISION

## CHILD CARE UPDATE



***SPRING- 2012***

*To the Child Care Community*

We have reached the 20th year of our efforts to keep the child care community informed about licensing programs and services. The Updates continue to be an important method for sharing information. We appreciate your support in sharing these Updates with those in your organization and others interested in child care issues.

You may find the topic of your choice in each Update without having to scroll down. Just put your cursor over the blue highlighted subject heading that you wish to review, hold down the control and shift buttons at the same time, and you will be taken to that area of the Update.

# TOPIC INDEX

[National Child Care Provider Appreciation Day: May 11, 2012](#)

## LICENSING MANAGEMENT INFORMATION

### LICENSING REQUIREMENTS

- [LEGISLATION](#)
- [California Child Passenger Safety Law](#)
- [CPR and First Aid Training](#)

### GENERAL HEALTH AND SAFETY INFORMATION

- [LETS MOVE!](#)
- [Healthy Kids Snack](#)
- [Allowable Alternatives to Bleach](#)

### EXTRA ! EXTRA! READ ALL ABOUT IT!!

- [Strange Caller Update](#)
- [Funding for Food](#)
- [Kelty Recalls Jogging Strollers Due to Fall and Injury Hazards](#)

### LICENSED CHILD CARE STATISTICS

### SUMMARY



### **National Child Care Provider Appreciation Day: May 11, 2012**

May 11, 2012, was Provider Appreciation Day, a special day to recognize child care providers, teachers, school-age program staff, child care center directors and staff, and all those who work with children and are responsible for their education and care. It is estimated that nearly 11 million children under age five are cared for by 2.8 million child care providers in the United States.

Provider Appreciation Day was started in 1996 by a group of volunteers in New Jersey who saw the need to recognize the tireless efforts of providers who care for children of working parents. Momentum and support for this event has grown each year, and recognition presently includes individuals and government organizations throughout North America, Europe, and Asia.

“By recognizing the dedication of child care providers on May 11, we remind our communities of the importance of quality child care and let providers everywhere know that we recognize and value their important work,” said Ollie M. Smith, Interim Executive Director of the National Association of Child Care Resource & Referral Agencies, the host organization of Provider Appreciation Day. “Ninety percent of brain development occurs during the first five years of life. Providing quality care for our children – especially during this critical time – will help ensure their future success.”

It takes a special person to work in the child care field, and these individuals are often unrecognized. This day offers an opportunity for parents to show their child care providers their appreciation.

To learn more about Provider Appreciation Day or for ideas on how you can thank your child care provider, visit [www.providerappreciationday.org](http://www.providerappreciationday.org).



# LICENSING MANAGEMENT INFORMATION

## WHO'S RETIRING?



Department of  
**SOCIAL SERVICES**



### **Gloria Merk**

We are sad to announce the retirement of Gloria Merk from the Community Care Licensing Division (CCLD). Gloria left the California Department of Social Services (CDSS) on March 30, 2012, and has moved on to other adventures. Gloria has had a distinguished career, including 25 years of state service.

After a number of years working in the not-for-profit sector serving individuals with special needs, she began her state service with the Department of Developmental Services, Office of External Affairs. Beginning in 1990, Gloria served as the Deputy Director for the Department of Alcohol and Drug Programs where she had a major role in streamlining CalWORKs administrative processes to deliver substance abuse treatment services. She brought many skills with her when she moved to CDSS in 2001 as the Deputy Director of the Administration Division.

In 2006, Gloria moved to CCLD as the Program Administrator of the Child Care Program (CCP) where she continued to make numerous contributions to CDSS, including spearheading New Directions for CCLD that invests in efficiencies to increase the health and safety of clients in out-of-home care. Most recently, she took on the role of Acting Chief of the Technical Assistance and Policy Branch.

Gloria has always shown a willingness to assist wherever needed for the good of CDSS and we will miss her a great deal in CCLD.



### **NEW CHILD CARE PROGRAM PROMOTIONS!!**

Please welcome Nancy Lunardi to the position of Chief of the Child Care Policy and Administrative Support Bureau in the CCP. This position was formerly vacated by Linda Inglett, who recently retired.

Nancy has been with CCLD since 1978 and has served in numerous capacities within the Division. She has been a Policy Analyst and a Licensing Program Analyst for both

residential and child care facilities. For the last two years, she has been the manager of the Policy and Advocacy Unit within the CCP.

During her years in the CCP, a few of her major accomplishments include the development and maintenance of the CCP licensing website, online orientations for child care facilities, and she is currently representing CDSS in the Race to the Top Early Learning Challenge Grant. Congratulations on your well-deserved promotion!

### **Other Promotions in the Child Care Policy and Administrative Support Bureau**

**Shanice Boyette** has been promoted to Staff Services Manager I over the Policy and Advocacy Unit, replacing Nancy Lunardi. She has been with the Child Care Program Office for the last five years where she has been a very accomplished Policy Analyst, and a Licensing Program Analyst in the Rohnert Park Office. Shanice has been responsible for analyzing legislation, developing implementation plans, training field staff, as well as working on a number of high profile child care policy projects. As a former employee of a Resource and Referral Agency, Teacher, Family Child Care Home Assistant and Basketball Coach, she brings an abundance of knowledge and experience to her new management position. Congratulations Shanice!

**Shelia Fleming** has been promoted to Staff Services Manager I over the Systems and Administrative Support Unit. Shelia has been with CDSS since 2000, and has previously worked for five years in various capacities for the Human Resource Department. She then transferred to the CCLD and accepted a position as an Administrative Analyst, where she remained for seven years until she accepted the position of Staff Services Manager I. Prior to coming to work for CDSS, Shelia was a manager in private sector and owned several businesses. Please join us in welcoming Shelia to her new position. Congratulations Shelia!

### **Regional Office Promotions!! New Licensing Supervisors**

#### **Bay Area Regional Office**

Antranette Robinson  
Glenn Schnell

#### **Fresno Regional Office**

Diana Deleon  
Valarie Reed

#### **Rohnert Park**

Peggy Hansen

#### **Los Angeles East Regional Office**

Bertha Manazares  
Victor Bautista



# LICENSING REQUIREMENTS

## LEGISLATION



A summary and implementation plan for pertinent bills chaptered in 2011 that affect child care facilities is available on the CCLD website at: <http://cclld.ca.gov/PG398.htm>

Unless otherwise noted in the summary and implementation plan, bills become effective January 1, 2012. We encourage licensees to review the summary and implementation plans to ensure compliance with the provisions of new laws. If you have any questions, you are encouraged to contact your local licensing regional office.



## **CALIFORNIA**

## **CHILD PASSENGER SAFETY LAW**

***Protect your child-- it is the law.***

### **Use of child passenger restraint system for child under age eight**

A parent, legal guardian, or driver shall not transport on a highway in a motor vehicle a child who is under eight years of age, without properly securing that child in a back seat in an appropriate child passenger restraint system meeting federal motor vehicle safety standards.

Exception: A child under the age of eight who is four feet nine inches (4'9") in height or taller may be properly restrained by a safety belt in the back seat.

### **Use of child passenger restraint system for child between eight and 16**

A parent, legal guardian, or driver shall not transport on a highway in a motor vehicle a child who is eight years of age or older, but less than 16 years of age, without properly securing that child in an appropriate child passenger restraint system or safety belt meeting federal motor vehicle safety standards.



“Properly restrained by a safety belt” means that the lower (lap) portion of the belt crosses the hips or upper thighs and the upper (shoulder) portion of the belt, crosses the chest.

**You may be cited for a violation of the child passenger restraint system provisions. In addition, your automobile insurance rates could be adversely affected as a result.**

**For more information on safety seats:**

- <http://www.cdph.ca.gov/programs/Pages/CPSinCalifornia-VOSP.aspx>
- <http://www.chp.ca.gov/community/safeseat.html>



## CPR AND FIRST AID TRAINING

Health and Safety Code Section 1596.866 requires directors of Child Care Centers (CCCs) and licensees of Family Child Care Homes (FCCHs) to ensure that at least one staff member who has a *current* course completion card in pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) is *onsite at all times when children are present at the facility*.

The course completion cards must be issued by the American Red Cross, the American Heart Association, or by a training program approved by the Emergency Medical Services Authority, or certified as approved by an accredited college or university.

**Note:** Courses taken from other training programs will not be accepted. *The training shall not be provided by an online or home study course.* Standard first aid and CPR courses **do not** meet the requirement for *pediatric* first aid and *pediatric* CPR.

### LICENSEE RESPONSIBILITIES

- Ensure his/her pediatric first aid and pediatric CPR course completion cards or certifications are current at all times.
- Ensure any substitute care provider left alone with children in care has current pediatric first aid and pediatric CPR course completion cards or certifications.

- Ensure course completion cards or certifications are available for review by the licensing agency upon request.

If a facility is found to be out of compliance with these requirements, Licensing Program Analysts will issue a citation and give a 90-day plan of correction period.

## GENERAL HEALTH AND SAFETY INFORMATION



Join family child care and center-based providers who have already committed to Let's Move! Child Care by signing up at [www.HealthyKidsHealthyFuture.org](http://www.HealthyKidsHealthyFuture.org) for updates, webinars, and to share your success stories!

Let's Move! Child Care is a new effort to promote children's health by encouraging and supporting healthier physical activity and nutrition practices for children in child care. With more than 20 percent of children between two and five years old overweight or obese, the child care community is an essential ally in the effort to prevent childhood obesity, support children's healthy development, and prevent the occurrence of later chronic disease.

The five goals of Let's Move! Child Care are in the following areas:

1. **Physical Activity**
2. **Screen Time**
3. **Food**
4. **Beverages**
5. **Infant Feeding**

Provide one to two hours of physical activity throughout the day, including outside play when possible.

No screen time for children under two years. For children age two and older, strive to limit screen time to no more than 30 minutes per week during child care, and work with parents and caregivers to ensure children have no more than one to two hours of quality screen time per day (as recommended by the American Academy of Pediatrics).



Serve fruits or vegetables at every meal, eat meals family-style whenever possible, and do not serve fried foods.

Provide access to water during meals and throughout the day, and do not serve sugar-sweetened drinks. For children age two and older, serve low-fat (1%) or non-fat milk, and no more than one four-to six-ounce serving of 100 percent juice per day.

For mothers who want to continue breastfeeding, provide their milk to their infants and welcome them to breastfeed during the child care day. Support all new parents' decisions about infant feeding.

For more information and to register for Let's Move! Child Care, visit:  
[www.HealthyKidsHealthyFuture.org](http://www.HealthyKidsHealthyFuture.org)



## Apple Sandwiches

Super-simple to make and healthy to eat, these breadless sandwiches make great snacks any time of day. Peanut butter is the good stuff that holds the treats together.  
Ingredients:

- 10 Tablespoons of peanut butter
- 1 Granny Smith apple, cored and cut into 10 rings, each about 1/4 inch thick
- 5 Tablespoons of granola
- 2 Tablespoons of golden raisins

Directions:

Spread two tablespoons of peanut butter onto half of the apple rings. Sprinkle each with one tablespoon of granola and a few raisins. Cover each with one of the remaining apple rings to form sandwiches.

Makes five apple sandwiches.

*(Submitted by Holli Jones)*

## Meeting California Child Care Infection Control Requirements: Allowable Alternatives to Bleach

In California, child care centers must comply with California Child Care Licensing regulations for sanitizing and disinfecting in order to maintain infection control. Bleach is cost-effective and widely used to meet those requirements. However, contact with bleach can burn the skin and eyes, and breathing bleach fumes can cause asthma symptoms, and irritation in the throat and lungs. According to the State's Work-Related Asthma Program, exposure to bleach has also been associated with new asthma cases. While controlling the spread of infection in child care is important, the use of safer products to protect the health of child care workers and children from asthma is also critical. For these reasons, the San Francisco Asthma Task Force looked for ways to reduce or eliminate bleach exposure in child care settings, and published their recommendations in a March 2011 report.

This article is intended to give you, as workers in licensed centers, information about alternatives to bleach that meet the State's requirements. Bleach is not the only product that meets the requirements. Licensing regulations, Title 22, Section 101438.1 (f) states that, "Commercial disinfecting solutions, including one-step cleaning/disinfecting solutions, may be used in accordance with label directions."

### California Child Care Licensing Requirements for Sanitizing and Disinfecting

| Requirement      | Surface (Regulation code)   | How Often                                   |
|------------------|---|---|
| <b>DISINFECT</b> | Infant/Toddler Classrooms:<br>✓ Diaper Changing Areas -- 101428 (7)                                 | After each use                              |
|                  | ✓ Potty Training Chairs -- 101428 (e)   | After each use                              |
|                  | Napping Equipment:<br>✓ 101239.1 (b)(4)   | Weekly, or if soiled or wet                 |
|                  | Napping Equipment—Infants:<br>✓ 101439.1 (B)  | Daily, or if soiled/wet                     |
|                  | Infant/Toddler/Classrooms with Mildly Ill Children:<br>✓ Sinks -- 101438.1 (c) (5), 101638.1 (e)(5) | After each use                              |
|                  | ✓ Floors -- 101438.1 (c)(1), 101638.1 (e)(1)  | At least daily, or more often if necessary  |
|                  | ✓ Walls/Partitions -- 101438.1 (c)(3), 101638.1(e) (1)  | At least weekly, or more often if necessary |
|                  | ✓ Mouthed Objects (Including Toys) -- 101438.1 (d), 101638.1(f)                                     | At least daily, or more often if necessary  |
| <b>SANITIZE</b>  | All Classrooms:<br>✓ Dishes/Utensils, Cups -- 101227 (a)(21)  | After each use                              |
|                  | Infant/Toddler Classrooms:<br>✓ Disposable Diaper Containers -- 101428 (d)(3)(a), 101628 (d)(2)     | Daily                                       |

**NOTE:** The Task Force recommends sanitizing snack/meal tables and high chair tables after each use.

### **Recommendations for Disinfecting and Sanitizing without Bleach**

The San Francisco Asthma Task Force is recommending the use of disinfectants and sanitizers that are safer for asthma. The recommended products do not contain bleach, and meet the state requirements for disinfecting and sanitizing in your child care center. The following list provides a basic overview of the products. More detailed information about the products that were tested for this project is available in the full report (See *“Resources” for how to access the report*).

- For disinfecting hard, non-porous surfaces such as **diaper changing tables**, the recommended alternative is a ready-to-use disinfectant with accelerated hydrogen peroxide as the active ingredient.
- For sanitizing **food contact surfaces** such as snack and meal tables, the recommended alternative is also ready-to-use and bleach-free.
- The Task Force is also recommending a **floor cleaner** with accelerated hydrogen peroxide as the active ingredient.

### **Recommendations for Reducing Bleach Exposure (if continuing to use bleach)**

If your child care center continues to use bleach for sanitizing and disinfecting, the Task Force recommends several methods and tools to reduce exposure to bleach and create a safer environment. Materials in English, Spanish and Chinese have been developed on how to use bleach correctly. The recommendations regarding safer use of bleach include simple tools that reduce exposure, such as:

- pumps that put the exact amount of bleach into your spray bottle (without metal parts that can rust)
- funnels that reduce bleach spills and splashes
- quart-size (32 ounces) spray bottles with ready-made labels to ensure the right bleach/water mixture
- digital timers to ensure the surface remains wet with bleach/water mixture for two minutes
- protective equipment such as eyewear (for example, goggles or glasses), gloves, and aprons.

### **Resources**

The San Francisco Asthma Task Force report also provides recommendations and guidelines for specific training needs of management, staff, and parents. The goal of these recommendations is to encourage the sustainability of best practices while protecting the health of child care workers and the children served.

Resources available as a result of this project include:

- products without bleach— cost and how to order
- tools to reduce exposure to bleach (if your center continues to use bleach)
- instructional signs and labels in English, Spanish, and Chinese for products without bleach and for using bleach/water mixtures.

To access the full project report and supplemental material, please visit either website:

- San Francisco Asthma Task Force, <http://www.sfgov3.org/index.aspx?page=721>
- Regional Asthma Management and Prevention, [www.rampasthma.org](http://www.rampasthma.org)

The San Francisco Asthma Task Force conducted this grant-funded\* pilot project to identify methods for infection control practices that eliminate or reduce child care operator exposure to bleach and published its report in March of 2011.

\*Funding was provided by San Francisco Foundation, Regional Asthma Management & Prevention, a private donor, and the San Francisco Public Health Foundation.

**EXTRA! EXTRA! Read all about it!**

## **STRANGE CALLER UPDATE**



### **ATTENTION CHILD CARE FACILITY PROVIDERS!**

Off and on the Child Care Licensing Program issues warnings to all child care facility providers regarding Licensing Program Analyst imposters, scams, and strange callers soliciting your personal/confidential information. This is an issue that you still need to be wary of.

However, we would also like to clarify that there are many organizations and agencies out there that are legitimately conducting national surveys or researching issues related to the child care industry. These entities may contact you in an effort to obtain urgently needed information regarding child care and education. These organizations/agencies are dependent upon your participation in order to obtain a complete and accurate picture of current early childhood education and child care needs, funding issues, etc. In some instances, an organization/agency may be mandated by law to conduct these surveys.

It would be to your benefit to participate in these surveys because it may identify national child care and early childhood education needs that:

- support provider professional development and working conditions,
- allocate funding to help families access high quality care and to help programs upgrade and maintain the quality of their services,
- help providers operate effectively within the marketplace and in ways that promote child development,
- improve families' access to care that meets their needs and is respectful of their preferences, and
- align and coordinate services across programs for young children.

If you receive a call(s) from an unknown individual, we strongly suggest that you ask questions including but not limited to their full name, phone number, organization name, website address, etc. If they will not provide it, hang up. If they do provide contact information, tell them you would like to verify who they are and will call them back.

If someone pays a visit to your home/facility, do not allow them to enter your home/facility. Always ask for their identification badge. Do not accept a driver's license or any other form of identification. Obtain their organization's name and contact information. Call your local child care regional office and/or their organization to obtain detailed information and verify their identity and connection with the organization.



## FUNDING FOR FOOD

The Child and Adult Care Food Program (CACFP) child care component is a state and federally funded program that gives financial aid to licensed child care centers and family child care homes. The objectives of the program are to:

- Improve the diets of children under 13 years of age by providing the children with nutritious, well-balanced meals, and
- Develop good eating habits in children that will last through later years.

Visit <http://www.cde.ca.gov/ls/nu/cc/ccf.asp> for more information about CACFP.

## U.S. Consumer Product Safety Commission

\*\*\*\*\*

### Kelty Recalls Jogging Strollers Due to Fall and Injury Hazards

The U.S. Consumer Product Safety Commission announced a voluntary recall of the Kelty Speedster Swivel Deluxe single jogging strollers and Swivel Deuce double jogging strollers. The front wheel can come loose during use and cause the stroller to tip over, posing a fall and injury hazard to children in the stroller and adults pushing the stroller

The following model numbers are included in this recall:

- Kelty Swivel Deluxe (single jogging stroller) Model Numbers: 20090116, 20090116B, 20650411BLU, 20650411CU
- Kelty Swivel Deuce (double jogging stroller) Model Numbers: 20090216, 20650611

**NOTE:** The model number and stroller name are printed on a tag inside the stroller's seat area.

Consumers should stop using recalled products immediately unless otherwise instructed. It is illegal to resell or attempt to resell a recalled consumer product.

To see this recall on CPSC's web site, including pictures of the recalled products, please go to: <http://www.cpsc.gov/cpscpub/prerel/prhtml12/12116.html>

\*\*\*\*\*

## LICENSED CHILD CARE STATISTICS

| Facility Type                           | Total Capacity | Total Licensed Facilities |
|---|----------------|---------------------------|
| Family Child Care Home*                 | 370,827        | 37,937                    |
| Infant Center                           | 44,784         | 1,987                     |
| Child Care Center                       | 592,835        | 10,617                    |
| Child Care Center - School Age          | 134,589        | 2,422                     |
| Child Care Center - Mildly Ill Children | 58             | 6                         |
| Total                                   | 1,143,093      | 52,969                    |

**NOTE:** This includes facilities licensed by the state and those counties which license FCCHs (Del Norte, Inyo, and Sacramento). County licensing statistics are through January 2012, per most recent report from Research and Development Division. State licensing statistics are through March 2012.

## SUMMARY

If you have questions about items included in this Update, or suggestions for future topics, please contact Paula d'Albenas, Acting Program Administrator, at (916) 651-0529. You may also visit our internet website at [www.cclld.ca.gov](http://www.cclld.ca.gov) to obtain copies of licensing Updates, office locations, provider letters, regulations, forms, the Licensing Evaluator Manual, or to learn more about licensing programs and services.

Sincerely,

***Original signed by Kathi Mowers-Moore for***

JEFFREY HIRATSUKA  
Deputy Director  
Community Care Licensing Division